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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/898,770	
Filing Date	July 2, 2001	
First Named Inventor	Edward Lichten	
Group Art Unit	1616	
Examiner Name	Not yet assigned	
Attorney Docket Number	20013810-0003	

To: Commissioner for Patents Washington, DC 20231 I, and all attorneys associated with Customer No. 26263, hereby apply to withdraw as attorney or agent for the above identified application. The reasons for this request are: Applicant has requested the file be transferred to another registered attorney. 1.

The correspondence address is NOT affected by this withdrawal. 2. A Change the correspondence address and direct all future correspondence to: **CORRESPONDENCE ADDRESS** Place Customer Number Customer Number Bar Code Label here OR ⊠ Firm *or* Dr. Edward M. Lichten Individual Name Address Midwest Medical Group Address 29355 Northwestern Highway, Suite 120 City Southfield State М ZIP 48304 Country Telephone (248) 358-3433 Fax (248) 358-2513 This request is enclosed in triplicate. Name Shashank Upadhye Signature Date

NOTE: Withdrawal is effective when approved rather than when received Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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